

POSITION	INITIALS	ID NO.	DATE
	<i>[Signature]</i>		06/16/00
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		49	6/27/00
FORMALITY REVIEW	RT	JC515	8-01-00
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

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Best Available Copy

If more than 150 claims or 10 actions  
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